

## SINGAPORE ACCIDENT STATEMENT

### IMPORTANT NOTICE

1. Please report correctly the details of the accident to speed up the claims process.
2. This Form must be completed by the Policyholder and/or the Authorised Driver.
3. Information provided must be as truthful and accurate as possible. Any wilful misrepresentation or withholding of material facts may allow insurance companies to repudiate policy liability.
4. The issue and acceptance of this Form by insurance companies is not an admission of policy liability on the part of the insurance companies.
5. **Any false reporting may be referred to the Police for investigation.**
6. This report will be forwarded by the insurers of the GIA Records Management Centre established by the General Insurance Association of Singapore (GIA) for archiving and that copies of this report will, for a fee, be made available upon application by interested parties.
7. By the lodgement of this report to the insurers, you hereby consent to the archiving of this report at the centre and to copies of the report being made available aforesaid.

### ACCIDENT STATEMENT

Date Of Report	10/04/2019 12:47
Date Of Accident	28/03/2019 16:20
Exact Location Of Accident	NORTH BUONA VISTA ROAD TOWARDS BIOPOLIS WAY
Country/State of Loss	SINGAPORE

### DETAILS OF OWN VEHICLE

Vehicle Registration Number	FBM4961H
<b>Insured/Policyholder</b>	
Name Of Registered Owner	MOHAMAD SARUDDIN BIN DASUKI
NRIC No	S8105493B
Email Address	NOEMAIL
Mobile Phone No	(LOCAL) +65-96752417
Alternative Phone No	OTHERS-96752417

### Vehicle Particulars

Manufacturer	HONDA
Model	CB190X-184CC
Exact Purpose for which vehicle was being used at time of accident	PRIVATE USE
Are you claiming under your own insurance policy for repair to your vehicle?	NO
If No, Please state action to be taken	THIRD PARTY
Vehicle Category	MOTORCYCLE

### Insurance Company

Name of Insurance Company	NTUC INCOME INSURANCE CO-OPERATIVE LTD
Type Of Coverage	THIRD PARTY
Fleet Policy	NO
Policy Number	5106059933
Cover Note Number	

### Driver

Name of Driver	MOHAMAD SARUDDIN BIN DASUKI
NRIC No	S8105493B
Date Of Birth	16/04/1981
Occupation	OUTDOOR
Date Of Driving Pass	05/08/2005
Driving Experience	13 YEARS AND 7 MONTHS
Gender	MALE
Mobile Number	(LOCAL) +65-96752417
Fax Number	
Contact Number	OTHERS-96752417
Email Address	NOEMAIL

Address	BLK 216 PETIR ROAD #02-417
Postcode	670216
Was driver an employee of the Insured's Company	NO
If No, Relationship of the Driver with the Insured	OWNER
Vehicle Registration Number of Driver's Own Vehicle	- - -
Insurance Company of Driver's Own Vehicle	- - -

#### General Information of the Accident

Type Of Accident	HIT BY FALLEN TREE / OTHER OBJECTS
Weather Conditions	CLEAR
Road Surface	DRY

#### Other Information

Was any foreign vehicle involved in this accident?	NO
Number of vehicles (including own vehicle) involved in the accident	1
Was any body injured in the Accident?	YES
Was any injured conveyed to hospital by ambulance?	YES
Was any other material or property damaged?	NO
I have been approached by unknown person(s) soliciting/offering accident claims assistance.	NO
Number of Passengers (Including Driver)	1

#### Details of Police Action

Was the accident reported to the police?	YES
If Yes, Please state which Police Station	
Police Station Name	BUKIT BATOK NEIGHBOURHOOD POLICE CENTRE
Police Station Address	<b>ROAD:</b> 21 BUKIT BATOK EAST AVE 4 , <b>POSTCODE:</b> 659840 , <b>COUNTRY:</b> SINGAPORE
Police Station Contact	<b>TEL NO:</b> 1800-6659999 - <b>FAX NO:</b> 66655793
Was notice of intended Prosecution given?	NO
If Yes, against whom?	

#### Circumstances of Accident

PLEASE REFER TO POLICE REPORT T/20190329/2113

#### Attachment(s)

Are accident photos available for attachment?	YES
Was there any video captured by Car Camera?	NO
Was there any audio recorded?	NO

#### DETAILS OF INJURED PERSON 1

Name	MOHAMAD SARUDDIN BIN DASUKI
Approximate Age	
Injuries Sustain	SLIGHT INJURY
Injured person in which vehicle?	FBM4961H
Were seat belts worn?	
Was this injured conveyed to hospital by ambulance?	NO
Address	
Postcode	

## Accident Sketch Plan

### SKETCH PLAN

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#### **8. Consent under the Personal Data Protection Act (PDPA)**

I understand, acknowledge, agree and consent that:

- (a) My insurer, my workshop and the General Insurance Association of Singapore ("GIA") may/are permitted to collect, use, disclose and/or process my personal data/personal information set out in this [form] and any other personal information provided by me or possessed by my insurer (collectively the "Personal Information") and disclose and transfer such Personal Information to all insurer(s) who have insured vehicle(s) involved in this accident (all insurer(s) who have insured vehicle(s) involved in this accident shall be collectively referred to as the "Insurers"), the insurers' lawyers/law firms, the Monetary Authority of Singapore and any relevant government agency/authority (such as the police), for the purpose(s) of:
  - (i) processing, handling and/or dealing with my claims including the settlement of the claims and any necessary investigations relating to the claims;
  - (ii) investigating the accident and/or my claims;
  - (iii) carrying out and/or dealing with my instructions or responding to any enquiries by me;
  - (iv) administering my claims (including the mailing of correspondence, statements, invoices, reports or notices to me, which could involve disclosure of certain personal data about me to bring about delivery of the same as well as on the external cover of envelopes/mail packages); and/or
  - (v) complying with applicable law in administering, processing, handling and/or dealing with my claims.(collectively the "Purposes")
- (b) all insurer(s) who have insured vehicle(s) involved in this accident and the Insurers' lawyers/law firms, may/are permitted to collect, use, disclose and/or process my Personal Information for one or more of the above Purposes; and
- (c) my Personal Information may/can be disclosed by any of the Insurers and/or GIA to their third party service providers or agents(including their lawyers/law firms), which may be sited outside of Singapore, for one or more of the above Purposes.
- (d) my Personal Information will also be collected and used to compile claims history for the purpose of fraud detection, investigation and management in present and all future claims.
- (e) the information so collected under (d) above may be shared / disclosed:
  - (i) to all insurers and/or any other third parties that assist in evaluating, investigating, controlling or managing fraud, regulators, law enforcement and government agencies as reasonably required for the purposes stated, or
  - (ii) for complying with requirements under any regulations, laws or court orders.

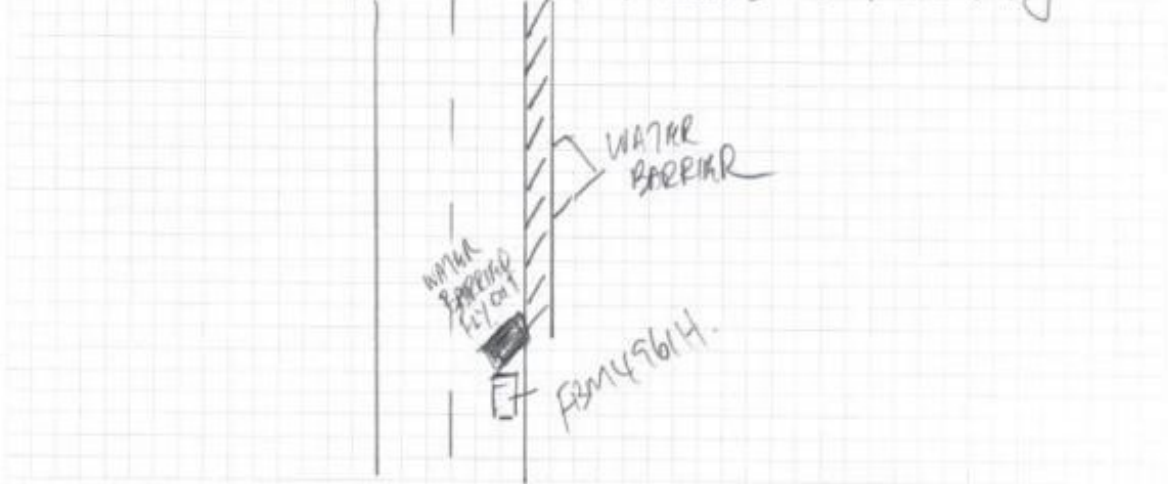
  
Policyholder's Signature  
Date & Time: 09/04/2019

Driver's Signature  
(If driver is not the policyholder)  
Date & Time:

  
Reporting Centre Personnel's Signature  
Name:   
NRIC/FIN No.:

# Accident Sketch Plan

SKETCH PLAN NORTH BUONA VISTA DR TOWARDS DIPOLOE WAY




## DESCRIBE CIRCUMSTANCES OF THE ACCIDENT

PLS REFER TO POLICE REPORT  
7/20190329/2113

## DECLARATION

I/We declare the foregoing particulars are true in every respect.

  
 Policyholder's Signature  
 Date & Time: 09/04/2019  
 Driver's Signature  
 (If driver is not the policyholder)  
 Date & Time:

  
 Reporting Centre Personnel's Signature  
 Name: ROSE WATERS  
 NRIC/FIN No.:

# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20190329/2113

1 of 3

Police Station Of Origin:  
Bukit Batok N.P.C  
21 Bukit Batok East Avenue 4 SINGAPORE  
659840  
Tel No: 1800-6659999

Report No. T/20190329/2113

## REPORT OF A TRAFFIC ACCIDENT

Date/Time Report Made: 29/03/2019 14:41		Vide Report No.:	Station Diary No.: 74
<b>Informant's Particulars</b>			
Name of Informant: MOHAMAD SARUDDIN BIN DASUKI		Address: APT BLK 216 PETIR ROAD #02-417 SINGAPORE 670216	
ID Type / ID No.: NRIC NO / S8105493B		Contact No.: Home/Office: Mobile: 96752417	
Nationality: SINGAPORE CITIZEN		Email:	
Sex: Male	Age: 38	Date of Birth: 16/02/1981	Type of Informant: Rider
Race: Boyanese		Language:	Institution / School Name:
Occupation: Food Courier		Driving Licence Information: Class: 2B Date of Expiry:	

## General Information of the Accident

Type of Accident:	Injury Conveyed By Ambulance	Drink Drive: No	Date/Time of Accident: 28/03/2019 16:20	Type of Location:
Location: Along Road 1 NORTH BUONA VISTA DRIVE Towards Biopolis Way, After Metropolis				
Weather: Clear		Road Surface: Dry	Road Speed Limit:	
Traffic Flow:		Traffic Control:	Traffic Volume:	
Type of Collision: Barrier against Moving Vehicle				Anyone conveyed by ambulance: No

## Details of Vehicle Involved

Vehicle No.	Type	Make	Model	Color	Condition	No of Passenger
FBM4961H	Motorcycle	HONDA	CB190X MANUAL	Red	Slightly Damaged	0

## Details of Vehicle Insurance

Vehicle No.	Insurance Company	Insurance No	Effective	Expiry Date
FBM4961H	NTUC Income Insurance Co-Operative Limited	5106059933	05/12/2018	29/11/2019



# POLICE REPORT



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T/20190329/2113

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21 Bukit Batok East Avenue 4 SINGAPORE  
659840  
Tel No: 1800-6659999

2 of 3

Report No. T/20190329/2113

## CONTINUATION OF REPORT

Details of Person Involved			
Any Pedestrian Involved: No			
No. of Pedestrians Injured: NIL		Use of Pedestrian Crossing: NA	
Rider			
Name	MOHAMAD SARUDDIN BIN DASUKI	ID No.	S8105493B
Related Vehicle	FBM4961H (Motorcycle)	Contact No.	96752417
Hospital/Clinic	NATIONAL UNIVERSITY HOSPITAL	Class of Driving Licence & Expiry Date	Class: 2B Date of Expiry: NIL
Date Treatment	28/03/2019	Date Discharge	28/03/2019
No. of Days granted Medical Leave	14	Degree of Injury	Slight

### Brief Details.

On 28/03/2019 at about 1600hrs, I was riding along North Buona Vista Drive towards Biopolis Way. Somewhere just after Metropolis, there was a stretch of water barriers aligned on the broken white lines of a filter lane leading to a right turn. The water barriers were blocking road users from entering into the filter lane.

On approaching the start of the stretch of barriers which were on my right, I felt a strong wind which slightly moved the water barrier closest to my motorcycle. Seeing that as a hazard, I evaded by shifting towards the left while still on the right lane. To my surprise, the wind blew the barriers more and the first barrier came into contact with the front wheel of my motorcycle. It was quickly followed by the second barrier coming into contact with the right side of my body. The impact caused me to fall to the right together with my motorcycle.

I felt immediate pain on both my arms. The damages on my motorcycle were all over it. I was assisted by a silvercab driver who pushed my motorcycle to the side to prevent further obstructions. I called LTA and was advised to call for police. Traffic Police and NTUC Orange Force subsequently arrived. I called the construction company responsible for the water barriers, Chye Joo Construction. The site supervisor and the manager subsequently arrived and they repositioned and secured the barriers. As the pain grew, the NTUC Orange Force officer assisted to call for ambulance.

I was conveyed to the National University Hospital where I was given medical attention. I suffered a fractured collar bone and was granted with 14 days of Hospitalisation Leave.

# POLICE REPORT



**SINGAPORE  
POLICE FORCE**



T/20190329/2113

3 of 3

Report No. T/20190329/2113

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Bukit Batok N.P.C  
21 Bukit Batok East Avenue 4 SINGAPORE  
659840  
Tel No: 1800-6659999

CONTINUATION OF REPORT

## Sketch Plan

Informant is not able to provide sketch plan

IMPORTANT: Please attach a copy of your vehicle's Insurance Certificate to this report. If you don't have the certificate with you now, please fax a copy to 65474885 stating the report number as reference.

Signature Of Officer Recording The Report:

J /

Staff Sgt MUSHAWWIR BIN ADRUS

Signature Of Interpreter:

Not applicable

Officer In Charge Of Case:

TP / GIT /

Staff Sgt NOR HIDAYU BINTE ABDUL SAMAD

Contact No.: 65476423

Authentication Stamp

NP168

Signature Of Informant:

Date/Time:

29/03/2019 14:41

Classification Of Case:

Singapore Police Force

Accident Photo





Accident Photo



Accident Photo





Accident Photo



Accident Photo





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